

Draft Recommendations: 2013 Long-Term Services and Supports Plan

GOALS and RECOMMENDATIONS

A. Introduction

The goals and recommendations provided in this Plan are put forward to improve the balance of the system of long-term services and supports in Connecticut for individuals of all ages and across all types of disabilities and their families. In addition to two rebalancing goals, this Plan provides a set of long-term and short-term recommendations. The long-term recommendations provide a high level view of the essential components of a well balanced and person centered system of long-term services and supports. These recommendations are reflective of a system of ~~care~~services and supports, and as such, must be viewed as both interrelated and interdependent. The short-term recommendations reflect strategic priorities identified for action over the next three years (2013-2015).

In 2005, a broad philosophical statement was enacted in Connecticut statute to guide policy and budget decisions. It states *that Connecticut's long-term care plan and policy must provide that individuals with long-term care needs have the option to choose and receive long-term care and support in the least restrictive, appropriate setting*. This simple statement provides a larger framework for Connecticut to make the necessary changes to the laws and regulations that govern the State's system of long-term services and supports to make real choices for people a reality.

As Connecticut continues its work to balance its system of long-term services and supports, progress must be made on multiple fronts. A balanced system of long-term services and supports is one where policies, incentives and services are aligned to allow individuals with long-term services and supports needs to live fulfilling and productive lives. Balancing the mix of home and community-based and institutional care as well as the mix of public and private resources is needed if Connecticut hopes to provide real long-term ~~care~~services and supports choices for its residents and to achieve the long-standing Vision, Mission and Governing Principles put forth by this ~~Plan~~ and previous Long-Term Care Plans. Over the years, Connecticut has made notable progress towards this goal, but more must be done to meet needs today as well as to anticipate the demands on the system of long-term services and supports that will be made by the aging of the baby boom generation.

Overall, the recommendations are primarily focused on initiatives State government can undertake. While the focus of this Plan is on State government, it is important to recognize the vital role that cities, towns, the private sector and individuals and families play in the system of long-term services and supports. Government at all levels must work in partnership with individuals, families and the private sector in order to develop a quality and effective system.

B. Goals

1. Balance the ratio of home and community-based and institutional care:

Develop a system that provides for more choice and opportunities for community integration as alternatives to all institutional settings, and increases the proportion of individuals receiving Medicaid long-term home and community-based care from 54 percent in 2011 to 75 percent by 2025, requiring approximately a 1.4 percent increase in the proportion of individuals receiving Medicaid long-term services and supports in the community every year.

2. Balance the ratio of public and private resources:

Increase the proportion of costs for long-term services and supports covered by private insurance and other dedicated sources of private funds to 25 percent by 2025. Such an increase in private insurance and other sources of private funding would reduce the burden both on Medicaid and on individuals' out-of-pocket expenses. Nationally, private insurance (long-term care and other health insurance) represented 11.6 percent of spending for long-term services and supports in 2010¹.

C. Long-term Recommendations

Optimally, a robust system of long-term services and supports that is able to maximize autonomy, choice and dignity will provide a full range of services and supports. Individuals, regardless of disability or age, should have the options that allow them to live their lives as meaningfully and productively as possible in the settings that best suit their needs and preferences, in the least restrictive environment. As in any system, all the constituent parts are interrelated and interdependent. Over the long term, to realize the vision and achieve the goals set out in this plan, actions must be taken on the following fronts:

- Provide true individual choice and self-direction to all users of long-term services and supports.
- Promote efforts to enhance quality of life in various long-term services and supports settings.
- Ensure the availability of a wide array of support services for those living in the community, including meals and adult day care.
- Assure quality of long-term services and supports ~~care~~ in the context of a flexible and person-centered service delivery system that acknowledges the dignity of risk.

¹ "Other dedicated sources of private funds" means private long-term care insurance, other types of private insurance and other private spending for nursing homes and home health services. It does not include "out-of-pocket" spending or informal care. Source: National Health Policy Forum; *The Basics: National Spending for Long-Term Services and Supports*; George Washington University; February 23, 2012.

- Achieve greater integration and uniformity of administration of State long-term services and supports ~~administration and functions~~ serving both older adults and people with disabilities and their families, and emphasize policies related to function as opposed to age or diagnosis.
- Encourage communities to take an active role in planning and supporting long-term services and supports for their residents.
- Address the long-term services and supports education and information needs of the Connecticut public, including specialized educational efforts to specific groups, such as baby boomers and employers.
- Address the anticipated long-term services and supports workforce shortage.
- Provide support to informal caregivers.
- Preserve and expand affordable and accessible housing for older adults and individuals with disabilities, including assisted living, residential care homes, and other supportive housing and emergency housing options for older adults.
- Encourage and enable the provider community to transform and develop services and supports that will help to achieve the goals of this Plan.
- Expand and improve employment opportunities and vocational rehabilitation for persons with disabilities and older adults.
- Increase availability of readily accessible, affordable, and inclusive transportation that accommodates the need for family and direct care worker companions.
- Provide a focus on health promotion and disease prevention to improve quality of life and reduce utilization of long-term services and supports and health care services.

D. Short-Term Recommendations

These short-term recommendations provide an action agenda for improving the system of long-term services and support in Connecticut in the three years spanning 2013 through 2015. Criteria for proposing these targeted priority recommendations are that they are critical to the success of the system of long-term services and supports and can be acted upon in the next three years.

Programs and Services

- Increase the number of slots of all the existing Medicaid home and community-based services waivers to meet the needs of all eligible applicants.
- In the State-funded tiers of the Connecticut Home Care Program for Elders, ~~reduce and/or~~ eliminate the required co-pay ment and expand eligibility to allow higher asset limits for clients.

- Provide occupational therapy with skill development for ~~all~~ nursing home residents who desire to with skill development to assist with transitioning back to the community.
- ~~Maintain~~ Expand funding for State-funded respite services, such as ~~Alzheimer's~~ the Statewide Respite Program, the state-funded tiers of the Connecticut Home Care for Elders and ~~Adult Day Care~~ the Department of Developmental Services in-home and out-of-home respite services in order to provide support to informal caregivers.
- Support family caregivers through compensation with the development of the new Adult Family Living initiative.
- Address isolation of all older adults and individuals with disabilities living in the community.
- Strengthen the connection of State and local services by strengthening the relationship to senior centers and services offered locally.

Infrastructure

- Achieve greater integration of and uniformity of administration of State long-term services and supports ~~administration and functions~~ serving both older adults and people with disabilities and their families, and emphasize policies related to function as opposed to age or diagnosis.
- Seek ~~and implement a federal approval for the Affordable Care Act~~ Balancing Incentive Payment Program ~~created by the federal Affordable Care Act~~ as a way means to secure additional federal investment in long-term services and supports rebalancing and systems reform in Connecticut.
 - Under the Balancing Incentive Payment Program integrate the Single Point of Entry with expanded statewide Aging and Disability Resource Centers (Community Choices) to provide information, referral, assistance and long-term support options counseling.
- ~~Address diversion~~ Use best efforts to divert individuals from nursing facilities or other institutions as appropriate, focusing upon. ~~Emphasize diversion at the point of~~ hospital admission and discharge.
- Address the historical fragmentation of the Medicaid home and community-based waivers, which are associated with specific age and diagnostic eligibility criteria.
 - Explore a broader 1915(i) State plan amendment to provide home and community-based supports based exclusively on functional limitations and financial need.
- ~~Reduce the backlog of Medicaid applications and waiting times for Medicaid eligibility determination.~~ Provide timely eligibility decisions regarding eligibility in all government sponsored long-term services and supports programs.
- Expand ~~statewide~~ Aging and Disability Resource Centers (Community Choices) statewide in support of for providing information, referral, assistance and long-term care support options counseling.

- Support ~~improvements-improved that would place new emphasis on~~ coordination, communication and guidance ~~between-among~~ the medical care, behavioral health and long-term services and supports systems.
 - ~~Assure-Ensure~~ that current and future initiatives such as Money Follows the Person, Rightsizing, and the Demonstration to Integrate Care for Medicare-Medicaid Enrollees (MME) are well coordinated and complementary.
 - Support the development of electronic health records by providers of long-term services and supports and exchange of data-exchange-and electronic health records sharing among providers across the CT health care continuum to streamline care transitions, coordinate care delivery and improve quality and outcomes.
 - Support a learning collaborative approach to bring together providers across disciplines and perspectives, and to learn from older adults and individuals with disabilities.
- Address emergency preparedness/disaster planning for older adults and persons with disabilities.
- Change the names of Long Term Care Planning Committee and Long Term Care Advisory Council to Long Term Supports and Services Planning Committee and Long Term Supports and Services Advisory Council.

Financing

- Achieve adequate and sustainable provider reimbursement levels that ~~meet-support~~ the cost of ~~care~~ long-term services and supports and quality requirements for all segments of the long-term services and supports continuum in order to ~~keep them viable to ensure capacity to~~ meet the growing needs and demographics of Connecticut residents.
- Implement global/~~flexible~~ budgeting to provide greater flexibility in ~~the~~ use of Medicaid funds for long-term services and supports.
- Capture and reinvest cost savings across the long-term services and supports continuum.
 - Reinvest savings resulting from Money Follows the Person and other emerging Medicaid long-term services and supports programs to enhance the availability and ~~infrastructure~~ capacity of home and community based services.
 - Implement/continue development of the “Savings Calculator” for information, referral, and assistance services such as CHOICES/Community Choices programs in order to better quantify the dollar value of proactive and unbiased information on the use of public benefits.

- Reform the Medicaid rate setting system for skilled nursing facilities ~~in light of the impact of consistent with~~ long-term services and supports rebalancing, rightsizing and a range of home and community based service initiatives.
- Explore various methods to increase the private sector's greater involvement as a payer of long-term services and supports.
 - Explore the development of tax incentives for the purchase of private long-term care insurance, including tax incentives for employer-based coverage.
 - ~~Adopt a full range of policies that discourage the transfer of large sums of wealth away from applicants or their spouses to achieve Medicaid coverage of long-term care services and supports.~~
 - ~~Perform a review of the long-term services and supports eligibility determination process toward achieving reforms designed to expedite the process with policies and procedures having the most profound impact on behaviors that are truly intended for the purpose of becoming eligible for Medicaid and those behaviors not intended to achieve Medicaid eligibility.~~
- Work with the Federal government to preserve Older Americans Act funding. This federal funding source is currently at risk.

Quality

- Create-Enable a collaborative, flexible and efficient regulatory environment that is adaptive and receptive to individual provider's forward thinking ideas and planning. Such an environment would encourage providers of the long-term services and supports continuum to adjust, modernize and diversify their models of care to address current and future consumer needs and expectations.
- The Departments of Public Health and Social Services should work together to ensure consistency among their respective regulations.
- Review licensing certification requirements and Probate Court protocols (there is no licensing for conservators or guardians) for training of community-based formal caregivers, conservators and guardians to assure that the specialized needs of the individual, such as those with Alzheimer's disease, are met and provide training where there are gaps.

Housing

- Support programs that divert or transition individuals from nursing facilities or other institutions to community housing options.
- Develop new housing alternatives for persons with serious and persistent mental illness who do not need nursing facility level of care.

- Support legislation that requires new homes to provide features to make it easier for individuals with mobility impairments to live in and visit.
- Continue the progressive State investment in the development of ~~senior~~ housing that is affordable and accessible for older adults and persons with disabilities.
- ~~Encourage the growth and development of community- based service models that bring long- term services and supports to housing residents. The model of affordable housing with assisted living services that has been developed in the state is exceptional and an example of what is needed to balance the current system of long- term services and supports.~~
- Work with the federal government to ~~preserve the Older Americans Act funding and to secure~~ at risk housing subsidy, preservation, and development funds. ~~These federal funding sources are currently at risk.~~

Workforce

- Endorse the full recommendations of the Long-Term Services and Supports Workforce Development Strategic Plan.
<http://www.cga.ct.gov/coa/pdfs/publications/2012/workforce%20plan%202.27.12.pdf>

Public Input

State Agencies

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Organizations

AARP: Nora Duncan, Claudio Gualtieri, Ed Dale

[Alzheimer's Association - Connecticut Chapter: Laurie Julian](#)

Commission on Aging: Julie Evans Starr, Deborah Mignault

CT Association of Area Agencies on Aging: Maureen McIntyre, Marie Allen, Neysa Guerino, Joan Wessell, Christina Fishbein

[CT Association of Health Care Facilities: Matthew Barrett](#)

CT Association for Home Care and Hospice, Inc.: Deborah R. Hoyt, President and CEO

[CT Community Care, Inc.: Molly Reese Gavin](#)

Enfield Senior Center: Susan Lather

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